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FOOTNOTES

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FIGURE LEGENDS

FIGURE 1. Hypoxia induces expression of LR11 in HSPCs. After incubation for 24 h or 48 h under normoxic or hypoxic conditions, the LR11 expression levels in c-Kit(+) Lin(-) cells and Lin(+) cells were evaluated by immunoblot analysis as described in "Experimental Procedures". The LR11-specific signals at 250 kDa were quantified using the Image-Lab software. The blot shown is representative of 3 independent experiments. Data are presented as mean \pm SD (n=3). * p<0.05; ns, not significant.

FIGURE 2. Effects of hypoxia on LR11 mRNA levels and on sLR11 production by U937 cells. A. LR11 mRNA expression in U937 cells after incubation under normoxic or hypoxic conditions for 3, 6, and 24 h were analyzed by quantitative PCR as described in "Experimental Procedures". mRNA levels are represented as fold increase of those at 0 h. Data are presented as mean \pm SD (n=3). * p<0.05; ns, not significant. B. After incubation under normoxic or hypoxic conditions for 6, 24, and 48 h, LR11 expression levels in U937 cells were analyzed by immunoblot analysis. The LR11-specific signals at 250 kDa were quantified using the Image-Lab software. The blot shown is representative of 3 independent experiments. Data are presented as mean \pm SD (n=3). * p<0.05; ns, not significant. C. The concentrations of sLR11 in conditioned media of U937 cells incubated under normoxic or hypoxic condition for 48 h were determined by ELISA as described in "Experimental Procedures". Data are presented as mean \pm SD (n=3). * p<0.05.

FIGURE 3. Effects of manipulating LR11 levels on the hypoxia-induced adhesion of immature hematological cells. A. After incubation in hypoxic or normoxic conditions for 24 h, the numbers of attached U937 cells, either transfected with shRNA specific for LR11 (#1 or #5) or with control shRNA (Ctrl), to MSCs were determined as described in "Experimental Procedures". Inset: LR11 levels in normal and LR11-knockdown U937 cells were analyzed by immunoblot. Data are shown as -fold increase of those at control cells without hypoxic conditions and presented as mean \pm SD (n=3). * p<0.05; ns, not significant. B. After incubation in normoxic or hypoxic conditions for 24 h, the numbers of c-Kit(+) Lin(-) cells prepared from $LR11^{+/+}$ or $LR11^{-/-}$ mice attached to OP-9 cells were determined as described in "Experimental Procedures". Data are presented as mean \pm SD (n=3). * p<0.05.

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FIGURE 4. Effects of sLR11 on HSPC adhesion to bone marrow stromal cells. A. U937 cells pre-incubated for 2 h with the indicated concentrations of sLR11 were subjected to analyses of their adhesion to plates coated with MSCs as described in "Experimental Procedures". B. Cells transiently transfected with cDNA specific for LR11 or with an empty vector (mock) were subjected to adhesion analyses as described for panel A. Inset: LR11 expression of mock-transfected and LR11-overexpressing U937 cells were analyzed by immunoblotting. C. c-Kit(+) Lin(-) cells pre-incubated for 15 min with the indicated concentrations of sLR11 were subjected to analyses of their adhesion to plates coated with OP-9 cells as described in "Experimental Procedures". In panels A to C, the numbers of attached cells are presented as -fold increase of those under control conditions (Mean ± SD, n=3). * p<0.05; ns, not significant.

FIGURE 5. Significance of LR11/uPAR-complex formation in hypoxia-induced adhesion of U937 cells. A. U937 cells (left panel) or c-Kit(+) Lin(-) cells (right panel) pre-incubated for 2 h with the indicated concentrations of sLR11 were subjected to analyses of their adhesion to plates coated with vitronectin as described in "Experimental Procedures". The numbers of attached cells are presented as -fold increase over those without sLR11 (Mean ± SD, n=3). * p<0.05; ns, not significant. B. U937 cells pre-incubated for 4 h with or without 1 ng/ml sLR11 in the presence of anti-uPAR neutralizing antibody (auPAR) or of control IgG (C. IgG) were subjected to analyses of their adhesion to plates coated with MSCs as described in "Experimental Procedures". The numbers of attached cells are presented as -fold increase of those without sLR11 or without antibodies (Mean ± SD, n=3). * p<0.05; ns, not significant. C. U937 cells pre-incubated for 24 h under normoxic or hypoxic conditions were incubated with 10 ng/ml sLR11 for 15min, the cell lysates were immunoprecipitated with the monoclonal anti-LR11 antibody M3 (aLR11) or with control IgG (C. IgG) and subjected to immunoblot analysis with the monoclonal anti-LR11 antibody A2-2-3 or with polyclonal antibodies against uPAR, respectively, as described in "Experimental Procedures". The signals for LR11 (250 kDa) or uPAR (65 kDa) were quantified using the Image-Lab software. D. K562 cells stably transfected with cDNA specific for LR11 or vector alone (mock) were subjected to flow cytometric analysis as described in "Experimental Procedures". The profiles of surface uPAR expression are presented in histograms. The frequencies and the mean fluorescence intensities (MFIs) of the fractions of cells with high uPAR levels are indicated. The filled histograms are isotype controls. Representative data from multiple experiments are shown. Inset: LR11 levels in control or LR11-overexpressing K562 cells were analyzed by immunoblot using the monoclonal anti-LR11 antibody, A2-2-3.

FIGURE 6. Functional link between HIF-1α and LR11 in enhancing hypoxia-induced cell adhesion. A. After incubation for 24 h under normoxic or hypoxic conditions (1% O_2 and 5% CO_2), LR11 and HIF-1α protein levels were evaluated by immunoblot analysis with the monoclonal anti-LR11 antibody A2-2-3, or with polyclonal antibodies against HIF-1α, respectively, as described in "Experimental Procedures". The specific signals for LR11 (250 kDa) and HIF-1α (120 kDa) were quantified using the Image-Lab software. B. U937 cells incubated for 48 h with the indicated concentrations of $CoCl_2$ were subjected to immunoblot analysis using monoclonal anti-LR11 antibody A2-2-3 as described in "Experimental Procedures". The LR11-specific signals at 250 kDa were quantified using the Image-Lab software. The blot shown is representative of 3 independent experiments. Data are presented as mean ± SD (n=3). * p<0.05; ns, not significant. C. Conditioned media collected after incubation for 48 h with the indicated concentrations of $CoCl_2$ were concentrated and subjected to sLR11 measurement by ELISA as described in "Experimental Procedures". Data are presented as mean ± SD (n=3). * p<0.05; ns, not significant. D. After incubation in normoxic or hypoxic conditions for 24 h with or without 1 ng/ml sLR11, the numbers of U937 cells previously transfected with siRNA specific for HIF-1α or with control siRNA attached to

MSCs were counted. U937 cells incubated for 4 h in the presence or absence of 1 ng/ml sLR11 after pre-incubation for 24 h under normoxic or hypoxic conditions were subjected to analyses of their adhesion to plates coated with MSCs as described in "Experimental Procedures". Data are shown as -fold increase compared to control cells in the absence of sLR11 under normoxia. Data are presented as mean \pm SD (n=3). * p<0.05; ns, not significant.

FIGURE 7. Binding of HIF- 1α to the potential binding site in the CD18 promoter. A. The nucleotide sequence including a potential HIF- 1α binding site within the LR11 gene promoter is shown. The motif 5' -ACGTG-3' spanning nucleotides -65 to -61 is boxed, and the sequences corresponding to the forward and reverse primers are shown with arrows. B. HIF- 1α binding to the LR11 and CD18 promoter in normoxic and hypoxic conditions was examined using chromatin immunoprecipitation (ChIP) analysis in U937 cells. Chromatin-associated DNA (Input) prior to immunoprecipitation with anti- HIF- 1α antibody was used for PCR controls. The amplified products were consistent with the expected size of fragments for LR11 (144 bp) and CD18 (166 bp) promoters, and the amplified sequences were confirmed to be identical to those expected, respectively. The photo shown is representative of 3 independent experiments.

Figure 1

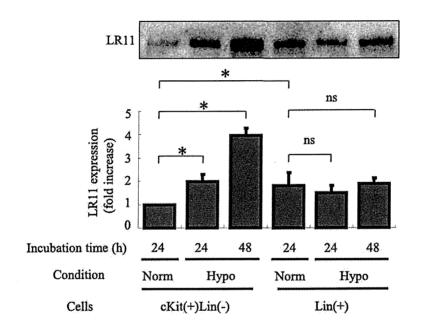
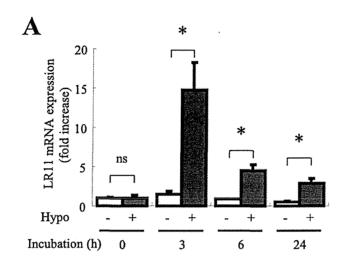
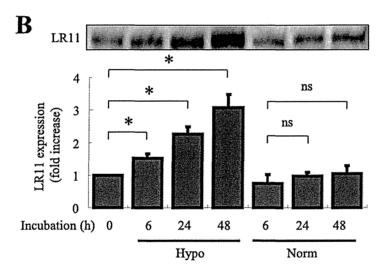


Figure 2





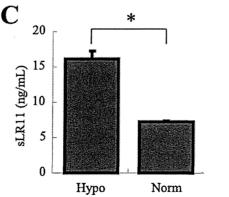


Figure 3

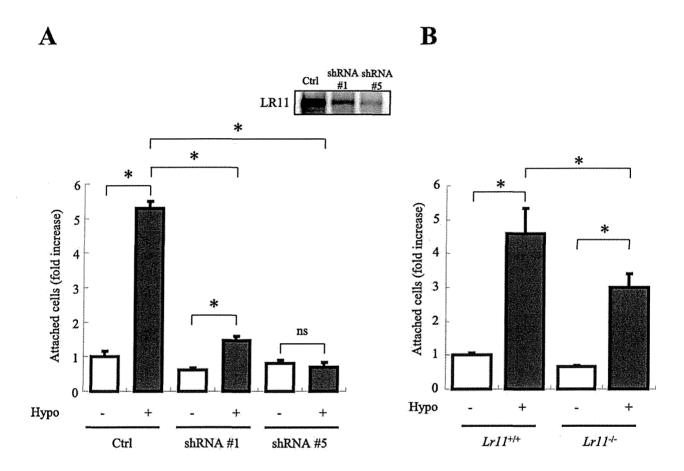


Figure 4

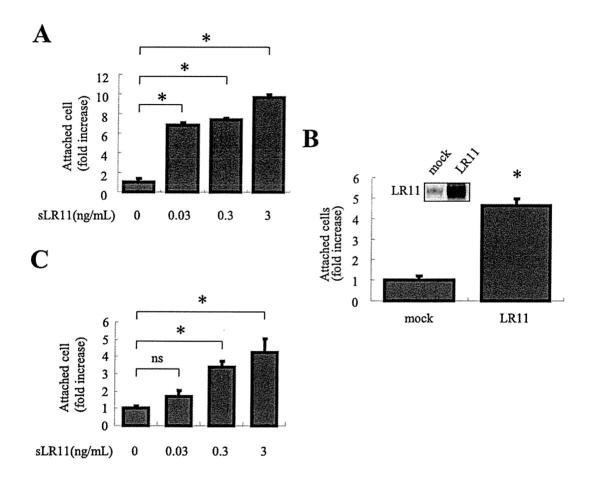


Figure 5

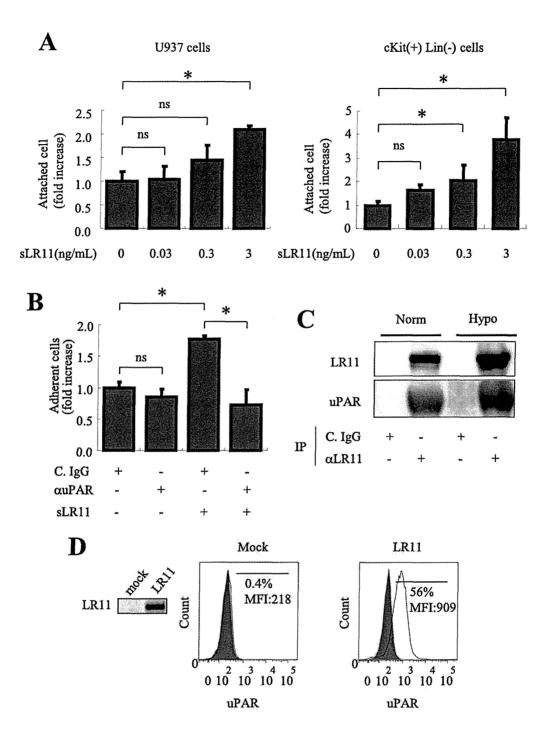


Figure 6

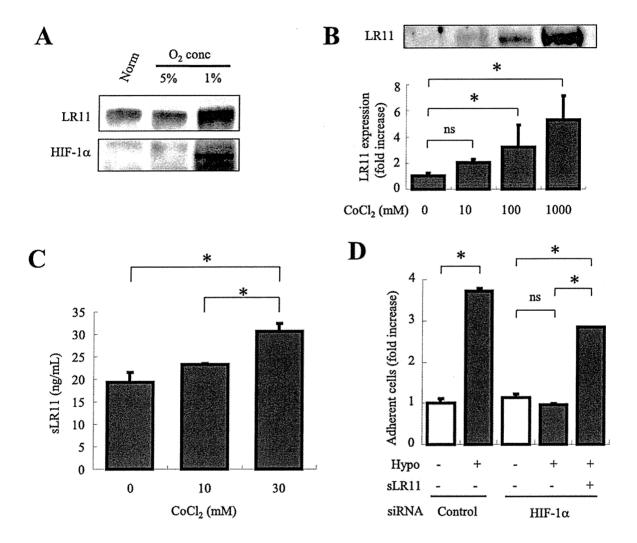
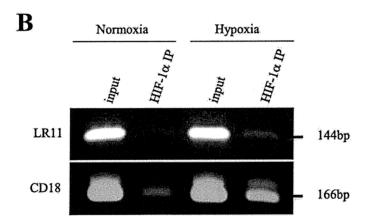


Figure 7

A CCCCCACCGGCGCTCGCTTAACTTCCCCATCCCGCGCCAG -138
GGAGGGGCCGGAGTCGCCGCGGGGCCGAGCGCAGAAAGTGC -93
GCGAAAGGGACGCGCGGGGCCCCACACGTGACGCGCGCCC -48
GAACCGAGCGGGACCTGGCGGCAGCGGGGGCGCAGCGGGGC -3
GGCCCGGAGCGGCGCGGGG +116



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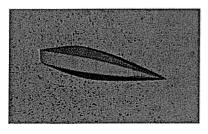
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Crystallization and preliminary crystallographic analysis of human LR11 Vps10p domain

Low-density lipoprotein receptor (LDLR) relative with 11 binding repeats (LR11; also known as sorLA) is genetically associated with late-onset Alzheimer's disease and is thought to be involved in neurodegenerative processes. LR11 contains a vacuolar protein-sorting 10 protein (Vps10p) domain. As this domain has been implicated in protein-protein interaction in other receptors, its structure and function are of great biological interest. Human LR11 Vps10p domain was expressed in mammalian cells and the purified protein was crystallized using the hanging-drop vapour-diffusion method. Enzymatic deglycosylation of the sample was critical to obtaining diffraction-quality crystals. Deglycosylated LR11 Vps10p-domain crystals belonged to the hexagonal space group P6,22. A diffraction data set was collected to 2.4 Å resolution and a clear molecular-replacement solution was obtained.

1. Introduction

LDLR relative with 11 binding repeats (LR11) is a type 1 membrane protein that is expressed abundantly in the central as well as the peripheral nervous system and to a lesser extent in other organs (Hermans-Borgmeyer et al., 1998; Yamazaki et al., 1996; Motoi et al., 1999). LR11 expression is selectively reduced in the brains of Alzheimer's disease (AD) patients (Scherzer et al., 2004). Genetic studies have also revealed a strong association of LR11 genetic variants with the risk of AD in several populations (Rogaeva et al., 2007; Lee et al., 2007; Bettens et al., 2008). Although the exact molecular mechanism underlying these phenomena is still unclear, LR11 has been hypothesized to be involved in the intracellular trafficking of amyloid precursor protein (APP) between the trans-Golgi network and early endosomes (Andersen et al., 2005; Willnow et al., 2008), reducing the chance of APP processing in the late endosomes. In fact, overexpression of LR11 in HEK293 cells reduced the levels of extracellular amyloid β peptide produced (Offe et al., 2006). In addition to direct interaction with APP during this trafficking (Andersen et al., 2006), LR11 may also directly interact with β -secretase, blocking the β -secretase-APP interaction (Spoelgen et al., 2006).

Uniquely among the LDLR gene family proteins, LR11 possesses an ~700-amino-acid domain that was initially identified in the vacuolar protein-sorting 10 protein (Vps10p), a sorting protein in yeast that transports carboxypeptidase Y from the Golgi to the vacuole (Marcusson et al., 1994). Mammalian receptors that contain this domain constitute another family of proteins that are highly expressed in neuronal tissues (Willnow et al., 2008). Sortilin is the most extensively studied member of this family and is thought to be involved in the intracellular sorting of brain-derived neurotrophic factor (Chen et al., 2005). The crystal structure of the sortilin Vps10p domain in complex with the neuronal peptide neurotensin has recently been reported (Quistgaard et al., 2009), revealing that the Vps10p domain is comprised of a unique ten-bladed β -propeller fold followed by two small cysteine-rich domains (10CC-a and 10CC-b domains) that make intimate contacts with the bottom face of the propeller. It was also revealed that the ligand peptide is deeply buried in the tunnel of the ten-bladed β -propeller fold. There is no precedent for β -propeller domains with a blade number greater than eight

crystallization communications

Table 1
Data-collection and processing statistics.

Values in parentheses are for the highest resolution shell.

No. of crystals	1	
Beamline	Photon Factory BL-17A	
Wavelength (Å)	0.980	
Detector	ADSC Quantum 270	
Crystal-to-detector distance (mm)	279.6	
Rotation range per image (°)	0.5	
Total rotation range (°)	130	
Exposure time per image (s)	5	
Resolution range (Å)	50-2.4 (2.44-2.40)	
Space group	P6,22	
Unit-cell parameters (Å)	a = b = 126.4, $c = 290.3$	
Mosaicity (°)	0.251	
Total No. of measured intensities	678636	
Unique reflections	54346 (2670)	
Multiplicity	12.5 (10.2)	
Mean $I/\sigma(I)$	15.9	
Completeness (%)	99.6 (100.0)	
Rmerget (%)	5.5 (46.9)	
R_{meas} or $R_{\text{r.i.m.}}$ (%)	5.8 (43.8)	
Overall B factor from Wilson plot (A^2)	58.3	

[†] $R_{\text{merge}} = \sum_{hkl} \sum_{i} |I_i(hkl) - \langle I(hkl) \rangle| / \sum_{hkl} \sum_{i} I_i(hkl)$, where $I_i(hkl)$ is the *i*th intensity of reflection hkl and $\langle I(hkl) \rangle$ is the weighted average intensity for all observations *i* of reflection hkl.

and the Vps10p domain is probably the largest of the known extracellular modules that fold as a single structural unit (Bork et al., 1996). Given the potential role of the Vps10p domain in the intracellular trafficking exerted by LR11, it is of great biological as well as medical importance to gain insight into the three-dimensional structure of the LR11 Vps10p domain. To this end, here we report the expression, purification, crystallization and preliminary crystallographic analysis of LR11 Vps10p domain.

2. Methods

2.1. Expression and purification of LR11 Vps10p domain

Human LR11 cDNA (gene accession No. NM 003105) was used to amplify the Vps10p domain, corresponding to the N-terminal 753-residue portion (Ohwaki et al., 2007). The primer sequences were 5'-CCGGAATTCGCCACCATGGCGACACGGAGCAG-3' EcoRI site is shown in bold) and 5'-CGATCTAGAGGGACA-GGGGACCAGCTCTCCTTCC-3' (the XbaI site is shown in bold). The resultant PCR product was cloned into the EcoRI/XbaI site of pcDNA3.1/Myc-His (Invitrogen) that had been modified to include tag sequences at the C-terminus, SRLENLYFQ^GGHHHHHHH-HHIEQKLISEEDLNMHTGHHHHHH, containing a tobacco etch virus (TEV) protease recognition sequence (shown in italics with the cleavage site indicated by a caret) and tandem His-tag (bold) and Myc-tag (underlined) sequences. Using this plasmid, CHO lec 3.2.8.1 cells (Stanley, 1989) were transfected as described previously (Nogi et al., 2006). The transfected cells were plated in 96-well plates and selected for resistance against 1.5 mg ml⁻¹ G418. Confluent culture supernatants from the single-colony wells were subjected to immunoblotting using anti-Myc antibody (Invitrogen) and the clone with the highest secretion level of LR11 Vps10p domain was chosen for production-scale culture in roller bottles. The recombinant protein was initially fractionated from the culture medium by ammonium sulfate precipitation (50% saturation), dissolved in wash buffer (20 mM Tris pH 8.0, 0.3 M NaCl, 50 mM imidazole) and applied onto an Ni-NTA agarose column (Qiagen). The column was washed with wash buffer and eluted with elution buffer (20 mM Tris pH 8.0, 0.3 M NaCl, 0.25 M imidazole). The eluted material was dialyzed in buffer A (20 mM Tris pH 8.0, 50 mM NaCl) and incubated with hexahistidine-tagged TEV protease at an enzyme:substrate ratio of 1:15(w:w)

for 16 h at 277 K to remove the C-terminal tag. For deglycosylation, endoglycosidase H (Endo H; New England Biolabs) was added at a ratio of 5 U enzyme per 1 µg substrate protein and was incubated together with TEV protease under the same conditions as described above. The samples were then reapplied onto the Ni-NTA agarose column to remove the cleaved tags and the protease. The flowthrough fractions were collected and applied onto a Mono Q 5/50 GL column (GE Healthcare). The column was equilibrated with buffer A and eluted with a linear gradient of NaCl (50-300 mM). LR11 Vps10p domain eluted as a single peak at around 150 mM NaCl. The purified protein was concentrated to 6 mg ml⁻¹ using an Ultrafree-0.5 centrifugal filter (30 kDa molecular-weight cutoff; Millipore). Typical yields ranged between 0.5 and 1.3 mg per litre of culture supernatant.

2.2. Crystallization

Initial screening for crystallization conditions was carried out using Index, Crystal Screen, Crystal Screen 2 and SaltRx from Hampton Research and Wizard Screens I and II from Emerald BioSystems. In these screens, a Mosquito crystallization robot (TTP Labtech) was used to dispense a mixture of 0.1 µl protein solution (LR11 Vps10p domain in 20 mM Tris pH 8.0, 150 mM NaCl) and 0.1 µl reservoir solution. Drops were equilibrated against 100 µl reservoir solution using the sitting-drop vapour-diffusion method at 293 K. The initial crystallization condition (solution No. 11 of Crystal Screen; 0.1 M sodium citrate tribasic pH 5.6, 1.0 M ammonium phosphate monobasic) was further optimized using a 24-well crystallization plate with the hanging-drop vapour-diffusion method. Each well contained 350 µl reservoir solution and the drop consisted of a mixture of 0.5 µl protein solution and 0.5 µl reservoir solution.

2.3. Data collection and phasing

For X-ray diffraction experiments, crystals were soaked in reservoir solution containing 20% glycerol or ethylene glycol and flash-cooled in liquid nitrogen. X-ray diffraction data for the crystal grown from the fully glycosylated sample were collected at 100 K on beamline BL44XU at SPring-8 (Harima, Japan) using a wavelength of 0.900 Å and a DIP-6040 imaging-plate detector (Bruker). An X-ray diffraction data set for the crystal grown from the Endo H-treated protein was collected at 95 K on beamline BL-17A at the Photon Factory (Tsukuba, Japan) using a wavelength of 0.980 Å and an ADSC Quantum 270 CCD detector. For the latter, data collection

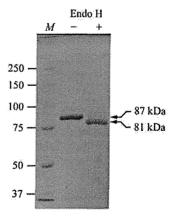


Figure 1 SDS-PAGE analysis of the purified LR11 Vps10p domain before and after Endo H treatment. 2 μg of the purified protein was either treated with 10 U Endo H (+) or left untreated (-) and subjected to SDS-PAGE using 8% gel under reducing conditions followed by staining with Coomassie Brilliant Blue. Lane M contains molecular-weight markers (labelled in kDa).

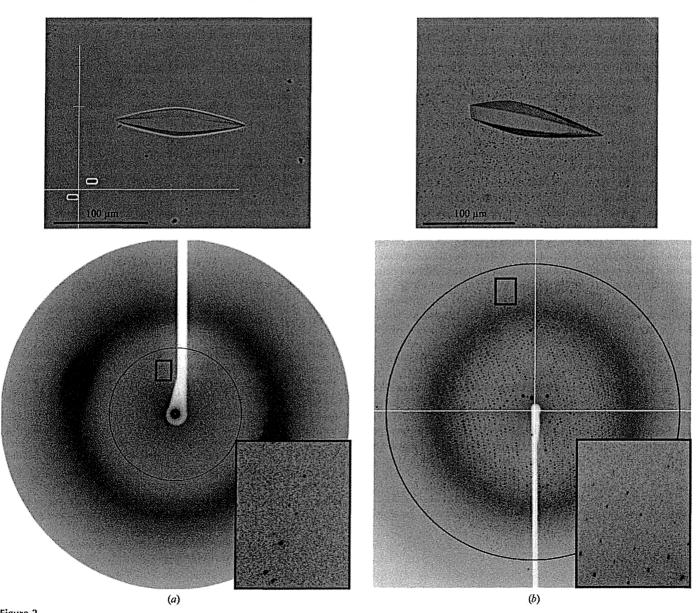
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was performed with a total oscillation range of 130° and each diffraction image was obtained with an oscillation angle of 0.5° and an exposure time of 5 s. The diffraction data were processed and scaled using the HKL-2000 program suite (Otwinowski & Minor, 1997). Data-collection statistics are listed in Table 1. Phase determination was performed by the molecular-replacement method using the program MOLREP (Vagin & Teplyakov, 2010). The initial model was refined with REFMAC5 (Murshudov et al., 1997) and a weighted $2F_{\rm obs} - F_{\rm calc}$ electron-density map was calculated using the coefficients produced by REFMAC5. Inspection of the crystal packing and the electron-density map was performed with Coot (Emsley & Cowtan, 2004).

3. Results and discussion

LR11 Vps10p domain contains six potential N-linked glycosylation sites and seven disulfide bonds, demanding production in a

mammalian-cell expression system. We used CHO lec 3.2.8.1 cells as the production host because they are known to produce glycoproteins with homogeneous glycoforms, which is ideal for crystallization (Davis et al., 1993). The relative molecular mass of the purified protein was estimated to be 87 kDa on an SDS-PAGE gel (Fig. 1). The difference from the calculated molecular weight (76 kDa) is consistent with the presence of glycosylation. Initial crystallization trials were performed using fully glycosylated sample. Crystals were obtained under the condition 0.1 M sodium acetate pH 4.5, 1.2 M sodium dihydrogen phosphate at 293 K and grew to dimensions of approximately $30 \times 30 \times 100 \,\mu\text{m}$ within two months (Fig. 2a). Processing of the X-ray diffraction images indicated that the unit-cell parameters of the crystal were a = b = 125.8, c = 292.7 Å (Fig. 2a). However, the resolution limit of X-ray diffraction was very low (below 6 Å) and we could not determine the atomic resolution structure using these crystals. We reasoned that the presence of highly flexible glycan chains in the crystal prevented ordered tight packing of the LR11 Vps10p domain. Therefore, we trimmed the glycan



Crystals and diffraction patterns obtained using samples before (a) and after (b) Endo H treatment. 6.0 Å (a) and 2.4 Å (b) resolution circles are shown. Expanded views of the regions marked with a rectangle are shown in the insets.

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chains from the purified protein using Endo H. Endo H cleaves between the two GlcNAc residues at the base of N-glycans, leaving a single GlcNAc residue at each glycosylation sequon that maintains overall protein solubility. Although Endo H exhibits varying degrees of cleavage efficiency towards different glycan chains, it is able to efficiently cleave the Man₅GlcNAc₂ chain, which is the predominant glycoform present on proteins expressed in CHO lec 3.2.8.1 cells (Davis et al., 1993). Endo H treatment of LR11 Vps10p domain resulted in a reduction of the relative molecular mass by ~6 kDa, which is consistent with the complete removal of six glycan chains (Fig. 1). The deglycosylated sample could be crystallized under the same conditions and with the same incubation period (~2 months) as the untreated sample (Fig. 2b). Remarkably, the quality of the crystals was dramatically improved and the crystals diffracted to 2.4 Å resolution (Fig. 2b), while the unit-cell parameters (a = b = 126.4, c = 290.3 Å) remained essentially unchanged from the original crystal of fully glycosylated sample (Table 1).

The symmetry and systematic absences of the diffraction intensities indicated that the new crystal of deglycosylated LR11 Vps10p domain belonged to either space group P6122 or its enantiomer P6522. In an attempt to determine the initial phases, the molecularreplacement method was performed using the atomic coordinates of the sortilin Vps10p domain (PDB code 3f6k; Quistgaard et al., 2009) as a search model. Specifically, the β -propeller module was extracted from the coordinates. In addition, residues and atoms that do not map onto the sequence of the LR11 Vps10p domain were deleted from the model with the 'FILE_SEQUENCE' option of MOLREP. While the sortilin Vps10p domain shows only 25% sequence identity to the LR11 Vps10p domain, it gave a clear solution in P6,22 for which the peak-to-noise ratios of the rotation and translation functions were 5.46 and 24.85, respectively. One monomer was located in the asymmetric unit, showing an R factor of 62.8%. The resulting model was subjected to initial rigid-body and subsequent restrained refinement, which resulted in a reduction of the R and R_{free} factors to 55.5% and 55.9%, respectively. Preliminary model building revealed that all of the potential N-linked glycosylation sites are located on the surface of the protein and we could identify clear electron density that is likely to represent the remaining GlcNAc moiety at five of the six sites. Furthermore, three of these sites are very close to the neighbouring molecules. Although the three N-glycans are not directly involved in crystal packing, it is possible that deglycosylation with Endo H stabilized the packing by lowering the disorder arising from the flexibility of the carbohydrates. In fact, the Matthews coefficient (Matthews, 1968) and solvent content (4.4 Å 3 Da-1 and 72.2%, respectively) suggested a loose crystal packing (Kantardjieff & Rupp, 2003), indicating the presence of a large space that can accommodate flexible N-glycans. Further model building and structure refinement are now in progress and the mechanism by which the deglycosylation improved the crystal quality may be clarified after completion of the model assignment, including the carbohydrates.

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Enhanced circulating soluble LR11 in patients with coronary organic stenosis

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ABSTRACT

LR11, an LDL receptor family member, is expressed in intimal smooth muscle cells. It was found that the soluble form of LR11 (sLR11) is detected in serum, and the circulating sLR11 levels are positively correlated with intima-media thickness of carotid arteries in dyslipidemic subjects. To clarify the significance of serum sLR11, the circulating sLR11 levels in patients with organic coronary stenosis and the contributing risk factors for them were studied. The subjects, 150 patients with symptoms of coronary artery disease, underwent coronary angiographic examination, and were divided into sex- and age-matched two groups; one is organic coronary stenosis group (OCS) and the other is normal coronary group (NC). Serum sLR11 levels were significantly higher in OCS than in NC (4.9 ± 2.7 U vs 3.6 ± 1.8 U, p < 0.05). Multivariate regression analysis showed that circulating sLR11 is independent contributing factor for the OCS, as well as diabetes mellitus and dyslipidemia. Among various coronary risk factors for sLR11 level, HbA1c showed the highest correlation coefficient (p < 0.01).

These results suggest that the circulating sLR11 might reflect coronary organic stenosis, and that hyperglycemic condition might be promoting factor for expression of LR11 in intimal smooth muscle cells.

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1. Introduction

In the formation of atherosclerosis, migration of vascular smooth muscle cells (SMCs) from the media to the intima is the key step [1,2]. Following migration, SMCs change the phenotype and proliferate in the intima, resulting in intimal thickness. Furthermore, proliferating SMCs secrete matrices and proteases to form atheromatous lesions under the influence of stimulatory cytokines [3–6].

Recently, we [7] identified LR11, which is an LDL receptor family member with poorly defined function, and observed the expressing of LR11 specifically in intimal SMCs, but not in medial SMCs, macrophages or lymphocytes in the arterial wall [7–10]. LR11 as both the membrane-spanning and the shed soluble (sLR11) forms bind to urokinase-type plasminogen activator receptor (uPAR) on the cell surface [8,11]. Over-expression of LR11 in SMCs enhances their migration via elevated levels of uPAR, and appears to thereby increase the activation of the uPA system [7,12].

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Interestingly, the sLR11 was detected in the serum, and that the circulating sLR11 levels are positively correlated with intimamedia thickness of carotid arteries in dyslipidemic subjects [13]. The relationship of the sLR11 levels in serum with other risk factors for atherosclerosis, such as age, sex, smoking, blood pressures, serum lipids, and plasma glucose was not observed. But, the precise was not clear yet.

It is reported that arterial intimal thickening after balloon catheter injury was enhanced in diabetic animals than control [6,14]. Clinically, increased intimal-medial thickness of carotid artery in type 2 diabetes was reported [15,16]. Thus, a relationship between coronary stenosis and sLR11 level, and also a relationship between sLR11 and diabetic condition were suspected.

In this report, we investigated the significance of circulating sLR11 in organic coronary stenosis (OCS) of the patients with a suspicion of coronary artery diseases (CAD). Contributing factors for the elevation of serum sLR11 were also analyzed.

2. Subject and methods

The subjects were 150 persons who were suspected to have coronary artery disease and who underwent coronary angiography at Toho University Sakura Hospital Cardiovascular Center were

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recruited for the study. Patients suffered from chronic heart disease with ejection fraction < 50% or chronic renal failure with serum creatinine > 1.3 mg/dl were excluded from the study analysis. The study protocol was approved by the Human Investigation Review Committee of Toho University Sakura Hospital, and informed consent was given by each patient.

The angiographical severity of coronary stenosis was assessed in the worst view position, and the percentage of luminal narrowing was recorded according to the American Heart Association reporting system [17]: organic coronary stenosis was defined as a stenosis with ≥75% diameter, and normal coronary artery (NC) was defined as without significant stenosis. Blood sample were collected in the morning after an overnight fast. Lipid variables and fasting blood glucose were measured by standard laboratory techniques. Serum insulin was measured by an enzymatic-immunological assay. Homeostasis model assessment insulin resistance index (HOMA-IR) was defined as: (plasma glucose x serum insulin)/405 [18]. Potential risk factors for atherosclerosis were analyzed, including age, sex, body mass index (BMI), smoking, and histories of hypertension, diabetes mellitus or dyslipidemia. Hypertension was defined as a history of hypertension (systolic pressure > 140 mmHg or diastolic pressure >90 mmHg). Diabetes mellitus was defined as a history of diabetes mellitus having fasting blood glucose >126 mg/dl and HbA1c >5.8%. Dyslipidemia was defined as a history of serum total cholesterol >220 mg/dl and/or triglyceride >150 mg/dl in the fasting and/or HDL-cholesterol <40 mg/dl.

3. Measurement of serum sLR11 concentration

Fasting blood samples were collected and were centrifuged immediately after collection to measure serum sLR11 levels. Fifty microliters of serum was purified using a 39kDa receptorassociated protein (RAP)-GST affinity beads (Cosmo Bio). For immunoblotting, equal amount of protein extracted from pelleted beads was subjected to 10% SDS-PAGE after heating to 95°C for 5 min as described [13] under reducing conditions, and transferred to a nylon membrane. Incubations were with antibody against LR11 (5-4-30-19-2 at 1:500 dilution) [13], followed by peroxidaseconjugated anti-mouse IgG. Development was performed with the ECL detection reagents (Amersham Pharmacia). The signals were quantified by densitometric scanning using NIH imageTM software. The sLR11 levels in each human serum (50 µl) was determined as an averaged value of three quantified signal intensities resulting from independent assays using samples with blind indication, and expressed as a ratio to that of a standard serum. The immunological estimation indicated that the signal of 1 U (in 50 µl serum) corresponded to approximately 50 ng/ml of recombinant sLR11.

4. Statistics

The results are shown as mean \pm SD or proportion (%) for each index. Statistical analysis was performed with SPSS version 13.0 (SPSS Japan Inc.). The unpaired t-test and the chi-square test were used to compare the continuous and the categorized variables, respectively. Pearson's correlation coefficient analysis was used to assess association between measured parameters. Subsequently, multiple linear regression analyses were used to calculate the ORs for the OCS (i) by controlling for all risk factors (age, sex, BMI, smoking, diabetes, hypertension, dyslipidemia and sLR11) (Model 1); (ii) by additionally controlling for BMI, diabetes, dyslipidemia, and sLR11, which are significantly associated with OCS by above analyses (Model 2). These risk factors were scored as explanatory factors, and subordinate variable was OCS = 1 and NC = 0. A value of p < 0.05 was considered significant. Multivariate analysis was performed by multiple regression analysis.

Table 1
Characteristics of the normal coronary artery and organic coronary stenosis subjects.

	NC	OCS .	p value
n istration	55	95	
Male (%)	65.5	74.7	0.23
Age (y)	66.1 ± 8.4	66.5 ± 9.7	0.87
BMI (kg/m ²)	23.9 ± 3.0	25.1 ± 3.4	< 0.05
Diabetes (%)	5.5	33.7	< 0.01
Hypertension (%)	56.4	64.2	0.34
Dyslipidemia (%)	52.7	85.3	< 0.01
sLR11(U)	3.6 ± 1.8	4.9 ± 2.7	<0.01
Fasting blood sugar (mg/dl)	106.7 ± 13.4	111.5 ± 27.1	0,22
Insulin (μU/dI)	6.2 ± 3.9	7.9 ± 4.9	< 0.05
HOMA-IR	1.7 ± 1.1	2.2 ± 1.9	<0.05
Medications			
Administration of statin (%)	18.2	66.3	< 0.01
Administration of ACE-I or ARB (%)	29.1	42.1	0.13

Plus-minus values are means \pm SD. The unpaired t-test was used for continuous variables, and the *chi*-square test was used for categorized variables. BMI: Body mass index. Circulating sLR11 levels in NC group and OCS group were 3.6 ± 1.8 U and 4.9 ± 2.7 U, respectively, indicating that the sLR11 levels in OCS were significantly higher than those in NC (p<0.01).

5. Results

5.1. Circulating sLR11 levels in NCA and OCS groups

The subjects were classified into age- and sex-matched two groups, according to the angiographical evaluation. Normal coronary artery group is composed of 55 subjects and organic coronary stenosis group is composed of 95 subjects (Table 1). BMI, histories of diabetes and dyslipidemia were significantly increased in the OCS group comparing with the NC group. Smoking and the history of hypertension were not different between the two groups. Insulin levels and HOMA-IR levels were significantly increased in the OCS group. Circulating sLR11 levels in NC group and OCS group were $3.6 \pm 1.8 \,\text{U}$ and $4.9 \pm 2.7 \,\text{U}$, respectively, indicating that the sLR11 levels in OCS were significantly higher than those in NC (p < 0.01). Note that we have reported that the mean circulating sLR11 levels in four-hundreds dyslipidemic subjects are $3.0 \pm 1.0 \text{ U}$ [13]. Thus, circulating sLR11 levels increased in the patients with organic coronary stenosis among the patients taking angiographical examination with a suspicion of coronary arterial diseases.

5.2. Multivariate analysis of sLR11 and other risk factors for OCS

We next analyzed the significance of sLR11 in comparison to other risk factors for OCS in all subjects (Table 2). The multivariate analysis of all variables (Model 1) for OCS showed that circulating sLR11 and the histories of diabetes or dyslipidemia were explanatory factor for OCS independent from other variables. The Model 2 analysis using the limited variables which have been shown to be significantly increased in OCS (see Table 1) showed that circulating sLR11 is still an independent factor for OCS. These results showed that the circulating sLR11 level was enhanced in OCS group among patients with a suspicion of CAD and taking coronary angiography.

5.3. Correlation of serum sLR11 with other various parameters in all subjects

As shown in Table 3, a negative correlation between sLR11 concentration and HDL-cholesterol (r=-0.161, p<0.05) and a positive correlation between sLR11 and triglyceride (r=-0.161, p<0.05) were found. Furthermore, BMI (r=0.182, p<0.05), insulin (0.186, p<0.05) and HOMA-IR (0.242, p<0.01) and HbA1c (r=0.272, p<0.01) showed significant positive correlations with sLR11, respectively. But there was no significant correlation between cir-